

CLAIMS ONLY							Application Number 10695249		Filing Date				
							Applicant(s)						
							* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT								
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1					51					
2								52					
3								53					
4								54					
5								55					
6								56					
7								57					
8								58					
9								59					
10								60					
11			1					61					
12								62					
13								63					
14								64					
15								65					
16								66					
17								67					
18								68					
19								69					
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24								74					
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41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
Total Indep			3					Total Indep					
Total Depend			17					Total Depend					
Total Claims			20					Total Claims					